



## Early Journal Content on JSTOR, Free to Anyone in the World

This article is one of nearly 500,000 scholarly works digitized and made freely available to everyone in the world by JSTOR.

Known as the Early Journal Content, this set of works include research articles, news, letters, and other writings published in more than 200 of the oldest leading academic journals. The works date from the mid-seventeenth to the early twentieth centuries.

We encourage people to read and share the Early Journal Content openly and to tell others that this resource exists. People may post this content online or redistribute in any way for non-commercial purposes.

Read more about Early Journal Content at <http://about.jstor.org/participate-jstor/individuals/early-journal-content>.

JSTOR is a digital library of academic journals, books, and primary source objects. JSTOR helps people discover, use, and build upon a wide range of content through a powerful research and teaching platform, and preserves this content for future generations. JSTOR is part of ITHAKA, a not-for-profit organization that also includes Ithaka S+R and Portico. For more information about JSTOR, please contact [support@jstor.org](mailto:support@jstor.org).

suspicious, and the county health officer did not know of their existence until he heard a rumor that two or three cases of sickness with eruption had occurred in this family. He immediately visited the house and pronounced the disease smallpox. This caused much antagonism and threats of recrimination, as the local physicians who were treating the cases stubbornly maintained that the disease was chicken pox. Consequently, at his request the county court asked for the services of an expert to determine whose diagnosis was correct, so that in the event the disease was smallpox there would be less opposition and criticism of such quarantine measures as the health officer might deem necessary to enforce.

The disease has also existed at Rippon, in another portion of Jefferson County, 6 miles from Charlestown and about 8 miles from Summit Point. The first case appeared at this point in the person of a negro man, who contracted the infection in Pittsburg, Pa., the disease developing soon after his return home. This case was mild; but the second, in a neighbor who had visited the sick man, was severe and of confluent type. The first case was promptly isolated and quarantined, and all the contacts and suspects were placed in an isolation camp and quarantined. Six cases in all developed, but all are now convalescent, and no further cases have occurred. The disease at this point was promptly stamped out by the prompt and energetic action of the county health officer. All of these cases were among negroes.

I inspected the camp and found it adequate for the small number of suspects and equipped on scientific principles, with bath houses and means for formaldehyde disinfection.

Two other cases of smallpox exist in the county in the persons of white farmers of the better class. One of them is a gentleman more than 50 years old who had been visiting in Clark County and was taken sick soon after his return home. The second case is that of a neighbor on an adjoining farm who visited his sick friend.

At the request of the health officer I met the members of the county board of health in session, stated that the disease at Summit Point was smallpox and that energetic measures were necessary to prevent its spread. The board granted absolute power to the health officer in dealing with the present and future cases of the disease, and as he is a man who understands the situation and the proper methods for dealing with it, energetic measures will be pursued until the disease is eradicated.

Respectfully,

J. C. PERRY,  
*Passed Assistant Surgeon.*

Respectfully forwarded,

JOHN F. ANDERSON,  
*Assistant Director Hygienic Laboratory.*

*The Surgeon-General.*

*Statistical reports of States and cities of the United States—Yearly and monthly.*

CALIFORNIA—*Fresno.*—Month of September, 1903. Estimated population, 18,000. Total number of deaths, 19, including 2 from tuberculosis.

*Los Angeles.*—Month of September, 1903. Estimated population,

135,000. Total number of deaths, 193, including diphtheria 2, enteric fever 3, whooping cough 1, and 40 from tuberculosis.

*Oakland*.—Month of September, 1903. Estimated population, 83,000. Total number of deaths, 72, including diphtheria 2, enteric fever 2, measles 1, whooping cough 1, and 4 from tuberculosis.

*Stockton*.—Month of September, 1903. Estimated population, 18,000. Total number of deaths, 17, including 1 from tuberculosis.

COLORADO—*Denver*.—Month of August, 1903. Estimated population, 175,000. Total number of deaths, 131, including diphtheria 6, enteric fever 15, and 48 from tuberculosis.

CONNECTICUT.—Reports to the State board of health for the month of September, 1903, from 164 towns, having an aggregate census population of 933,514, show a total of 1,154 deaths, including diphtheria 15, enteric fever 28, measles 10, scarlet fever 7, whooping cough 11, and 102 from tuberculosis.

*Bridgeport*.—Month of September, 1903. Estimated population, 82,128. Total number of deaths, 112, including measles 4, and 13 from tuberculosis.

IOWA—*Davenport*.—Month of August, 1903. Estimated population, 40,000. Total number of deaths 40, including enteric fever 1, and 2 from tuberculosis.

Month of September, 1903. Total number of deaths 32, including enteric fever 1, scarlet fever 1, and 7 from tuberculosis.

LOUISIANA—*New Orleans*.—Month of September, 1903. Estimated population, 310,000—white, 227,000; colored, 83,000. Total number of deaths, 489—white, 309; colored, 180; including diphtheria 6, enteric fever 14, scarlet fever 1, whooping cough 3, and 72 from tuberculosis.

MASSACHUSETTS—*Brockton*.—Month of September, 1903. Estimated population, 44,873. Total number of deaths 32, including diphtheria 4, enteric fever 8, scarlet fever 1, and 4 from tuberculosis.

MICHIGAN.—Reports to the State board of health, Lansing, for the week ended October 10, 1903, from 83 observers, indicate that intermittent fever, scarlet fever, pneumonia, and remittent fever were more prevalent, and inflammation of kidney, pleuritis, inflammation of bowels, whooping cough, meningitis, and smallpox were less prevalent, than in the preceding week.

Meningitis was reported present at 4, measles at 9, whooping cough at 11, smallpox at 28, diphtheria at 34, scarlet fever at 58, enteric fever at 99, and phthisis pulmonalis at 223 places.

Reports to the State board of health, Lansing, for the five weeks ended October 3, 1903, indicate that enteric fever, phthisis pulmonalis and pleuritis were more prevalent, and whooping cough, erysipelas and measles were less prevalent than in the preceding month.

Meningitis was reported present at 8, measles at 24, whooping cough at 32, smallpox at 57, diphtheria at 73, scarlet fever at 103, enteric fever at 182, and phthisis pulmonalis at 233 places.

During the quarter ended September 30, 1903, the following outbreaks of dangerous communicable diseases were reported and acted upon: Diphtheria, 95; measles, 99; whooping cough, 100; smallpox, 104; meningitis, 116; scarlet fever, 151; typhoid fever, 266; phthisis pulmonalis, 369; total for the 8 diseases, 1,300 outbreaks.

MINNESOTA—*Minneapolis*.—Month of September, 1903. Estimated population, 202,718. Total number of deaths, 180, including diphtheria 7, enteric fever 10, scarlet fever 1, whooping cough 2, and 24 from tuberculosis.

NEW HAMPSHIRE—*Manchester*.—Month of September, 1903. Census population, 56,987. Total number of deaths, 10, including diphtheria 1, and 5 from tuberculosis.

OHIO—*Cleveland*.—Month of September, 1903. Estimated population, 420,000. Total number of deaths, 476, including diphtheria 16, enteric fever 40, scarlet fever 3, whooping cough 2, and 38 from tuberculosis.

PENNSYLVANIA—*Altoona*.—Month of September, 1903. Census population, 38,973. Total number of deaths, 56, including diphtheria 2, enteric fever 3, and 5 from tuberculosis.

RHODE ISLAND—*Newport*.—Month of September, 1903. Estimated population, 28,000. Total number of deaths, 30, including 3 from tuberculosis.

TENNESSEE—*Chattanooga*.—Month of September, 1903. Estimated population, 40,000—white, 27,000; colored, 13,000. Total number of deaths, 35—white, 22; colored, 13—including diphtheria 1, enteric fever 2, and 4 from tuberculosis.

*Knoxville*.—Month of September, 1903. Estimated population, 40,000. Total number of deaths, 30, including enteric fever 1, and 5 from tuberculosis.

*Nashville*.—Month of September, 1903. Estimated population, 80,865—white, 50,796; colored, 30,069. Total number of deaths, 131—white, 65; colored, 66—including diphtheria 1, enteric fever 3, whooping cough 1, and 21 from tuberculosis.

TEXAS—*San Antonio*.—Month of September, 1903. Estimated population, 65,000. Total number of deaths 115, including diphtheria 3, enteric fever 7, smallpox 1, and 19 from tuberculosis.

UTAH—*Salt Lake City*.—Month of September, 1903. Estimated population, 75,000. Total number of deaths 65, including enteric fever 5, and 2 from tuberculosis.

WASHINGTON—*Seattle*.—Month of September, 1903. Estimated population, 125,000. Total number of deaths, 108, including diphtheria 1, enteric fever 6, scarlet fever 1, and 6 from tuberculosis.

*Tacoma*.—Month of September, 1903. Estimated population, 55,000. Total number of deaths, 51, including enteric fever 4, and 4 from tuberculosis.